POSITION	INITIALS	ID NO.	DATE
	M A		06-19
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		8	6-29-01
FORMALITY REVIEW	TAP	1110	8-9-01
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✔ .... Rejected
= .... Allowed
— (Through numeral)... Canceled
÷ .... Restricted

N .... Non-elected
I .... Interference
A .... Appeal
O .... Objected

Claim		Date			Claim		Date		Claim		Date
Final	Original				Final	Original			Final	Original	
①	1	N				51				101	
	2	N				52				102	
	3	N				53				103	
④	4	N				54				104	
⑤	5	N				55				105	
⑥	6	N				56				106	
⑦	7	N				57				107	
	8	O				58				108	
	9	O				59				109	
⑩	10	N				60				110	
⑪	11	N				61				111	
⑫	12	N				62				112	
	13	N				63				113	
	14	O				64				114	
⑮	15	=				65				115	
⑯	16	=				66				116	
⑰	17	N				67				117	
⑱	18	N				68				118	
19	19	N				69				119	
	20	N				70				120	
	21	N				71				121	
	22	N				72				122	
	23	N				73				123	
㉔	24	N				74				124	
	25	N				75				125	
	26	N				76				126	
㉗	27	N				77				127	
	28	N				78				128	
	29	N				79				129	
㉚	30	N				80				130	
	31	N				81				131	
	32	N				82				132	
	33	N				83				133	
	34	N				84				134	
	35	N				85				135	
	36					86				136	
	37					87				137	
	38					88				138	
	39					89				139	
	40					90				140	
	41					91				141	
	42					92				142	
	43					93				143	
	44					94				144	
	45					95				145	
	46					96				146	
	47					97				147	
	48					98				148	
	49					99				149	
	50					100				150	

If more than 150 claims or 10 actions
staple additional sheet her

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